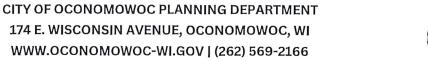
## **APPLICATION FOR A**

## **CERTIFICATE OF APPROPRIATENESS**



CONTACT	INFORMATION:	
	APPLICANT	PROPERTY OWNER
NAME		
ADDRESS		
PHONE #	· ·	
EMAIL		
PROPERTY /	Y INFORMATION: ADDRESS NAME / TITLE	
PROJECT	DESCRIPTION:	
		R ADDITION, MATERIALS TO BE HISTORIC STRUCTURES OR SITE. GES IF NECESSARY.
,		
		·





ATTACHMENTS:		
PLEASE INCLUDE THE FOLLOWING MATERIALS IN THE APPLICATION SUBMITTAL		
PHOTOGRAPHS SHOWING THE EXISTING STRUCTURE OR SITE		
SKETCHES OR RENDERINGS SHOWING THE PROPOSED ALTERATION OR ADDITION		
SITE PLANS SHOWING DIMENSIONS AND SETBACKS FOR THE PROPOSED ALTERATION OR ADDITION, NEARBY STRUCTURES, AND PROPERTY LINES		
MATERIAL AND COLOR SAMPLES (IF NECESSARY)		
SIGNATURE:		
ABOVE OR THAT I AM THE OWNER OF THE SUBJECT PROPERTY LISTED ABOVE OR THAT I HAVE AUTHORIZATION FROM THE OWNER TO SUBMIT AN APPLICATION ON BEHALF OF THE PROPERTY OWNER. I CERTIFY THAT THE INFORMATION CONTAINED IN THIS FORM AND ATTACHMENTS IS ACCURATE TO THE BEST OF MY KNOWLEDGE. I HEREBY PETITION THE HISTORIC PRESERVATION COMMISSION OF THE CITY OF OCONOMOWOC, WISCONSIN TO ISSUE A CERTIFICATE OF APPROPRIATENESS FOR THE WORK DESCRIBED ABOVE.  APPLICANT'S PRINT NAME:  APPLICANT'S SIGNATURE:		
DATE:		
PLANNING DEPARTMENT OFFICE USE ONLY:  ADMINISTRATIVE APPROVAL: YES NO		
ADMINISTRATIVE APPROVAL DATE:		



## APPLICATION FOR THE DESIGNATION OR REMOVAL OF A DESIGNATION OF A LOCAL HISTORIC STRUCTURE OR SITE

NO FEE TO APPLICANT / OWNER

CONTACT	INFORMATION:	
_	APPLICANT / PROPERTY OWNER	
NAME		
ADDRESS		
PHONE#		
EMAIL		
	Y INFORMATION:	
PROPERTY ADDRESSPROPERTY NAME / TITLE		
	PERTY ON THE NATIONAL REGISTER OF HISTORIC PLACES?	
SEEKING A:	YES NO	
DES	IGNATION OF A LOCAL HISTORIC STRUCTURE	
DESI	IGNATION OF A LOCAL HISTORIC SITE	
REM	OVAL OF A DESIGNATION AS A LOCAL HISTORIC STRUCTURE	
REM	OVAL OF A DESIGNATION AS A LOCAL HISTORIC SITE	



## **DESCRIPTION:**

PLEASE INCLUDE THE FOLLOWING MATERIALS IN THE APPLICATION SUBMITTAL:  PHOTOGRAPHS SHOWING THE EXISTING STRUCTURE OR SITE  SITE PLANS SHOWING DIMENSIONS AND SETBACKS FOR THE SUBJECT STRUCTURE OR SITE, NEARBY STRUCTURES, AND PROPERTY LINES	IF SEEKING A DESIGNATION, DESCRIBE HOW THE SUBJECT SITE OR STRUCTURE DISPLAYS HISTORIC, ARCHITECTURAL, OR CULTURAL SIGNIFICANCE TO THE CITY OF OCONOMOWOC. SEE SECTION 17.705(5)(b) OF THE CITY ZONING ORDINANCE FOR CRITERIA. IF SEEKING A REMOVAL OF A DESIGNATION, EXPLAIN WHY THE SITE OR STRUCTURE NO LONGER DISPLAYS HISTORIC, ARCHITECTURAL, OR CULTURAL SIGNIFICANCE. ATTACH ADDITIONAL PAGES IF NECESSARY.
PLEASE INCLUDE THE FOLLOWING MATERIALS IN THE APPLICATION SUBMITTAL:  PHOTOGRAPHS SHOWING THE EXISTING STRUCTURE OR SITE  SITE PLANS SHOWING DIMENSIONS AND SETBACKS FOR THE SUBJECT STRUCTURE OR SITE, NEARBY STRUCTURES, AND PROPERTY LINES  SIGNATURE:  I HEREBY CERTIFY THAT I AM THE OWNER OF THE SUBJECT PROPERTY LISTED ABOVE. I CERTIFY THAT THE INFORMATION CONTAINED IN THIS FORM AND ATTACHMENTS IS ACCURATE TO THE BEST OF MY KNOWLEDGE. I HEREBY PETITION THE HISTORIC PRESERVATION COMMISSION AND THE COMMON COUNCIL OF THE CITY OF OCONOMOWOC, WISCONSIN TO APPROVE THE REQUEST DETAILED ABOVE.  APPLICANT'S PRINT NAME:	
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	APPLICANT'S PRINT NAME:
DATE:	APPLICANT'S SIGNATURE:
	DATE:

CITY OF OCONOMOWOC PLANNING DEPARTMENT 174 E. WISCONSIN AVENUE, OCONOMOWOC, WI WWW.OCONOMOWOC-WI.GOV | (262) 569-2166

